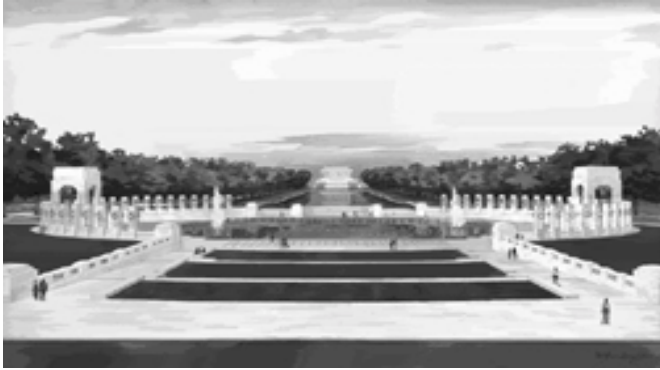


Final Registration Form

AWON National Conference 2004

“In Their Memory”

May 28-31, 2004
JW Marriott Hotel
1331 Pennsylvania Avenue NW, Washington, DC 20004



AWON Conference 2004 will be held in conjunction with the dedication of the National World War II Memorial scheduled for Saturday, May 29, in Washington, DC. Our AWON Conference begins on Friday, May 28 and concludes on the evening of Monday, May 31 with a **Candlelight Memorial Service** in recognition of our fathers.

This **FINAL REGISTRATION** serves several purposes:

- ...to announce the final registration fee to those who have pre-registered
- ...to receive the names of mothers and veterans in attendance so they may be recognized during our conference
- ...to offer a final opportunity to register for the conference

NOTE: Hotel reservations are closed for the JW Marriott Hotel. However, Penny LeGrand will assist you in obtaining a hotel in the DC area and is also keeping a waiting list for the JW Marriott. Contact Penny at plegrand@bvtravel.com, 800-518-7338 or 520-825-2757.

Member: _____

Guest: _____

(Please indicate relationship to Member)

Address: _____

City: _____

State: _____ Zip: _____

Home Phone: _____

Work Phone: _____

Email: _____

Name of Father: _____

Name of Mother in Attendance: _____

Name of Veteran(s) in Attendance: _____

Is this your first AWON Conference? Yes ___ No ___

Registration Fee:

***Active Member (\$125) \$ _____

(pre-registrants: \$50 balance due)

***Inactive Members (\$150) \$ _____

***First Guest (\$75) \$ _____

(pre-registrants: \$50 balance due)

***Additional Guests (\$25/person) \$ _____

(Pre-registrants: \$0 balance due)

Registration Total \$ _____

(Pre-registrants: Send only the balance due fee noted above.)

AWON Banquet – Monday Evening

***Included in registration fee for member and first guest.

Please indicate choice and number of Banquet entrées:

Chicken _____ Beef (Filet Mignon) _____

Fish (Salmon) _____ Vegetarian (Eggplant Musaka) _____

Banquet entrées may be purchased for other guests:

Chicken (\$50) x _____ = \$ _____

Beef (\$67) x _____ = \$ _____

Fish (\$65) x _____ = \$ _____

Vegetarian (\$50) x _____ = \$ _____

(All entrée prices include tax and gratuity)

Total enclosed for registration and banquet \$ _____

\$ _____ Check or Money Order enclosed *or*

Please charge \$ _____ to my credit card (*Visa/MC only*)

Please provide the following

Name on Card: _____

Card Number: _____

Type of Card (Visa or M/C): _____ Expires: _____

Signature: _____

Send registration form with check, money order or credit card billing information to:

AWON

Attn: Walt Linne

5745 Lee Road, Indianapolis, IN 46216

Phone: 1 (317) 359-8064

Email: wlinne@iupui.edu

(Please make a copy of this form for your records.)

BRING & SHARE YOUR MEMORABILIA!

EXPECT AN INCREDIBLE EXPERIENCE!

IN THEIR MEMORY!